

**Refer to this
CENSUS FILE NUMBER 4**
**in any correspondence
pertaining to this report**

1997 REPORT OF ORGANIZATION

Item 5A — ESTABLISHMENTS OF YOUR COMPANY AND ITS SUBSIDIARIES, AND THEIR 1997 EMPLOYMENT AND PAYROLL

We have prelisted establishments of your company based on Census records. Please bring this list up to date as follows:

- **Column (a)** — Correct any errors or omissions in the prelisted information. For your convenience the prelisted establishments have been grouped in the following sequence: Employer Identification Number (EIN), major activity, and geographic location.

- **Column (b), 1997 establishment data** — Report number of employees and payroll for each establishment (including part-year operations). Please do not combine data for establishments. If book figures are not available for employment and payroll for each establishment, please provide your best estimates.
- **Column (c)** — Report status of each establishment as of the end of 1997.

Line No.	Employer Identification Number (EIN), establishment name, address of physical location (including ZIP Code), and major activity <i>Add store or plant number, if any, and correct any errors or omissions.</i>							1997 establishment data <i>Report the number of employees and payroll for each establishment (including part-year operations)</i>			Status of establishment at end of 1997 <i>Mark (X) one box and complete as indicated.</i>			
	(a)							(b)			(c)			
								Employees (during pay period including March 12, 1997)	Number		1 <input type="checkbox"/> In operation 2 <input type="checkbox"/> Idle or inactive (but still owned) → 3 <input type="checkbox"/> Closed (no new owner or operator), dismantled, or destroyed on → 4 <input type="checkbox"/> Sold or leased to another operator – Give date at right → <i>AND enter name, etc., below</i>	Month	Year	
	EIN	Major activity							032					
	Name							Payroll for 1st quarter of 1997 before deductions	Mil.	Thou.	Name of new owner or operator Number and street City State ZIP Code			
						Store or plant No.			031					
	Physical location — <i>Number and street</i>													
	City			State		ZIP		Total annual payroll for 1997 before deductions	030		5 <input type="checkbox"/> Other – Describe →			
Census use only	Census file number	TOC	SIC		SCE	CYTE	CCS							
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	Physical location — <i>Number and street</i>													
	City			State		ZIP		Total annual payroll for 1997 before deductions	030		5 <input type="checkbox"/> Other – Describe →			
Census use only	Census file number	TOC	SIC		SCE	CYTE	CCS							

▶

Item 5A — ESTABLISHMENTS OF YOUR COMPANY AND ITS SUBSIDIARIES, AND THEIR 1997 EMPLOYMENT AND PAYROLL — Continued

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							Employees (during pay period including March 12, 1997)	Number		1 <input type="checkbox"/> In operation	Month	Year
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	Physical location — <i>Number and street</i>											
	City			State		ZIP		Total annual payroll for 1997 before deductions	030		City	State
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Census use only	Census file number	TOC	SIC		SCE	CYTE	CCS			5 <input type="checkbox"/> Other – Describe →		
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					Store or plant No.		Payroll for 1st quarter of 1997 before deductions	030		Name of new owner or operator		
	Physical location — <i>Number and street</i>											
	City			State		ZIP		Total annual payroll for 1997 before deductions	030		City	State
Census use only	Census file number	TOC	SIC		SCE	CYTE	CCS			5 <input type="checkbox"/> Other – Describe →		

Item 5B — LISTING OF ADDITIONAL ESTABLISHMENT(S) AND/OR NEW PLANT(S) UNDER CONSTRUCTION OPERATED BY YOUR COMPANY AND ITS SUBSIDIARIES

- **Column (a)** — List separately any establishments of your company and its subsidiaries that were not included on the inventory list but were in operation or **any new plant(s) under construction** during part or all of 1997. If separate activities are conducted at the same location, see definition of an establishment in the definitions and instructions provided.
- **For acquired establishments** that you list, complete item (e).
- **For new plant(s) under construction or all other establishments** that you list, complete item (f).
- **Column (b)** — Complete this column for each listed establishment.
- **Column (c)** — Mark (X) the box which best describes the activity of each establishment. *See box codes at right.*
- **Column (d)** — Describe major activity or list principal products or services.

DESCRIPTION AND CODES FOR COLUMN (c)

- 1 — Agricultural production

2 — Agricultural services

3 — Minerals extraction or ore processing

4 — Mining services or oil and gas field services

5 — Construction

6 — Merchant wholesalers

7 — Commission merchant/broker/agent

8 — Manufacturers' sales branches, manufacturers' sales offices

9 — Manufacturing

10 — Finance, insurance, or real estate

11 — Retail
- 12 — Retail concessions/departments in retail stores

13 — Transportation, communications, and utilities

14 — Legal, educational, or health services

15 — Services

16 — Central administrative office: accounting, purchasing, legal activities for your own company

17 — Other auxiliary establishments such as storage warehouses and research laboratories primarily providing service to your own or affiliated company rather than customers or clients

18 — Other — *Specify major activity in column (d) below.*

IMPORTANT DO NOT DUPLICATE ESTABLISHMENTS ALREADY PRELISTED IN ITEM 5A

Line No.	Employer Identification Number (EIN), establishment name, your store or plant number, if any, address of physical location (including ZIP Code)				1997 establishment data <i>Report the number of employees and payroll for each establishment (including part-year operations)</i>		Kind of business activity in 1997		Description of major activity or principal products or services			
							Major activity Mark (X) one box from the above descriptions	SIC				
(a)												
	EIN											
	Name	Store or plant number			Employees (during pay period including March 12, 1997)	Number						
						032						
	Physical location — <i>Number and street</i>				Payroll for 1st quarter of 1997 before deductions	Mil.	Thou.					
						031						
	City		State	ZIP Code	Total annual payroll for 1997 before deductions	030						
	(e) Name and address of former owner or operator and date of purchase											
	Name and address of former owner or operator			Month	Year							
	(f) Date establishment opened or is expected to open and expected employment		Month	Year	Expected employment							
	EIN											
	Name	Store or plant number			Employees (during pay period including March 12, 1997)	Number						
						032						
	Physical location — <i>Number and street</i>				Payroll for 1st quarter of 1997 before deductions	Mil.	Thou.					
						031						
	City		State	ZIP Code	Total annual payroll for 1997 before deductions	030						
	(e) Name and address of former owner or operator and date of purchase											
	Name and address of former owner or operator			Month	Year							
	(f) Date establishment opened or is expected to open and expected employment		Month	Year	Expected employment							

Item 5B — LISTING OF ADDITIONAL ESTABLISHMENT(S) AND/OR NEW PLANT(S) UNDER CONSTRUCTION OPERATED BY YOUR COMPANY AND ITS SUBSIDIARIES — Continued

- **Column (a)** — List separately any establishments of your company and its subsidiaries that were not included on the inventory list but were in operation or **any new plant(s) under construction** during part or all of 1997. If separate activities are conducted at the same location, see definition of an establishment in the definitions and instructions provided.
- **For acquired establishments** that you list, complete item (e).
- **For new plant(s) under construction or all other establishments** that you list, complete item (f).
- **Column (b)** — Complete this column for each listed establishment.
- **Column (c)** — Mark (X) the box which best describes the activity of each establishment. *See box codes at right.*
- **Column (d)** — Describe major activity or list principal products or services.

DESCRIPTION AND CODES FOR COLUMN (c)

- 1 — Agricultural production

2 — Agricultural services

3 — Minerals extraction or ore processing

4 — Mining services or oil and gas field services

5 — Construction

6 — Merchant wholesalers

7 — Commission merchant/ broker/agent

8 — Manufacturers’ sales branches, manufacturers’ sales offices

9 — Manufacturing

10 — Finance, insurance, or real estate

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17 — Other auxiliary establishments such as storage warehouses and research laboratories primarily providing service to your own or affiliated company rather than customers or clients

18 — Other — *Specify major activity in column (d) below.*

IMPORTANT ▶ DO NOT DUPLICATE ESTABLISHMENTS ALREADY PRELISTED IN ITEM 5A

Line No.	Employer Identification Number (EIN), establishment name, your store or plant number, if any, address of physical location (including ZIP Code)	1997 establishment data		Kind of business activity in 1997												
		<i>Report the number of employees and payroll for each establishment (including part-year operations)</i>		Major activity <i>Mark (X) one box from the above descriptions</i>	Description of major activity or principal products or services											
	(a)	(b)		(c)	SIC (d)											
	EIN → <table><tr><td></td><td></td><td></td><td>—</td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>				—							Employees (during pay period including March 12, 1997)	Number		1 <input type="checkbox"/> 10 <input type="checkbox"/> 2 <input type="checkbox"/> 11 <input type="checkbox"/> 3 <input type="checkbox"/> 12 <input type="checkbox"/> 4 <input type="checkbox"/> 13 <input type="checkbox"/> 5 <input type="checkbox"/> 14 <input type="checkbox"/> 6 <input type="checkbox"/> 15 <input type="checkbox"/> 7 <input type="checkbox"/> 16 <input type="checkbox"/> 8 <input type="checkbox"/> 17 <input type="checkbox"/> 9 <input type="checkbox"/> 18 <input type="checkbox"/>	
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			(f) Date establishment opened or is expected to open and expected employment	Month					Year	Expected employment	SIC	OLDID				
	OPN															
	EIN → <table><tr><td></td><td></td><td></td><td>—</td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>				—							Employees (during pay period including March 12, 1997)	Number		1 <input type="checkbox"/> 10 <input type="checkbox"/> 2 <input type="checkbox"/> 11 <input type="checkbox"/> 3 <input type="checkbox"/> 12 <input type="checkbox"/> 4 <input type="checkbox"/> 13 <input type="checkbox"/> 5 <input type="checkbox"/> 14 <input type="checkbox"/> 6 <input type="checkbox"/> 15 <input type="checkbox"/> 7 <input type="checkbox"/> 16 <input type="checkbox"/> 8 <input type="checkbox"/> 17 <input type="checkbox"/> 9 <input type="checkbox"/> 18 <input type="checkbox"/>	
				—												
	Name	Store or plant number	032													
					Payroll for 1st quarter of 1997 before deductions	Mil.	Thou.									
	Physical location — <i>Number and street</i>	031														
					City	State	ZIP Code	030								
	(e) Name and address of former owner or operator and date of purchase		Total annual payroll for 1997 before deductions	030												
	Name and address of former owner or operator	Month			Year	Census use only	Census file number	TOC								
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	OPN															
	EIN → <table><tr><td></td><td></td><td></td><td>—</td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>				—							Employees (during pay period including March 12, 1997)	Number		1 <input type="checkbox"/> 10 <input type="checkbox"/> 2 <input type="checkbox"/> 11 <input type="checkbox"/> 3 <input type="checkbox"/> 12 <input type="checkbox"/> 4 <input type="checkbox"/> 13 <input type="checkbox"/> 5 <input type="checkbox"/> 14 <input type="checkbox"/> 6 <input type="checkbox"/> 15 <input type="checkbox"/> 7 <input type="checkbox"/> 16 <input type="checkbox"/> 8 <input type="checkbox"/> 17 <input type="checkbox"/> 9 <input type="checkbox"/> 18 <input type="checkbox"/>	
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	OPN															

1997 REPORT OF ORGANIZATION

<div>DUE DATE</div> <div>FEBRUARY 12, 1998</div>	
<div><p>If you have questions about completing this report, please call or write the Census Bureau. In any communication, be sure to refer to the 11-digit Census File Number (CFN) printed in the label to the right.</p><p>Return your completed form to:</p><div><div>BUREAU OF THE CENSUS</div><div>1201 East 10th Street</div><div>Jeffersonville, IN 47132-0001</div></div></div>	<div>(Please correct any error in name, address, and ZIP Code)</div>

YOUR RESPONSE IS REQUIRED BY LAW. Title 13, United States Code, requires businesses and other organizations that receive this questionnaire to answer the questions and return the report to the Census Bureau. By the same law, **YOUR CENSUS REPORT IS CONFIDENTIAL.** It may be seen only by Census Bureau employees and may be used only for statistical purposes. Further, copies retained in respondent’s files are immune from legal process.

Item 1 — CERTIFICATION

Name of person to contact regarding this report	Address (if different from above address)	Telephone		
		Area code	Number	Extension
		FAX		
		Area code	Number	
This report (including attached continuation pages) is substantially accurate and has been prepared in accordance with instructions.				
Signature of authorized person		Title		Date

Item 2 — COMPANY OWNERSHIP OR CONTROL — DOMESTIC

Does another U.S. (domestic) company own more than 50 percent of the voting stock of your company OR have the power to control the management and policies of your company?

DOM

1 ☐ Yes — Enter the following information on the owning or controlling company then go to item 3.

2 ☐ No — Go to item 3.

Name of owning or controlling company

Home office address — Number and street, city, State, and ZIP Code

Employer Identification Number (EIN) of owning or controlling company	Percent of voting stock owned — Mark (X) one
<div><div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div></div>	<div><div>1 <input type="checkbox"/> Less than 50%</div><div>2 <input type="checkbox"/> 50%</div><div>3 <input type="checkbox"/> More than 50%</div></div>

Item 3 — COMPANY OWNERSHIP OR CONTROL — FOREIGN

Does a foreign entity (company, individual, government, etc.) own directly or indirectly 10 percent or more of the voting stock or other equity rights of your company?

FOR

1 ☐ Yes — Enter the following information on the owning entity then SKIP to item 4.

☐ No — Does a foreign entity directly own or control 10 percent or more of any U.S. corporation of which you are the majority owner?

3 ☐ Yes — Provide the name, mailing address , and Employer Identification Number (EIN) of subsidiaries in which a foreign entity has a 10 percent or more direct ownership interest on a separate sheet of paper. Be sure to enter the item number, your company’s name and address, and the Census File Number in the upper right corner of each additional sheet. Then go to item 4.

2 ☐ No — Go to item 4.

Name of foreign beneficial owner

Home office address — Number and street, city and country

Percent ownership (direct and indirect) — Mark (X) one	2 <input type="checkbox"/> 10—24%	4 <input type="checkbox"/> 50%	6 <input type="checkbox"/> 100%
	3 <input type="checkbox"/> 25—49%	5 <input type="checkbox"/> 51—99%	

Item 4 — FOREIGN AFFILIATES

Does this company alone, or with its domestic affiliates, own 10 percent or more of the voting stock of an incorporated foreign business enterprise, or an equivalent interest in an unincorporated business enterprise, including ownership of real estate?

AFF

1 ☐ Yes

2 ☐ No

We estimate that it will take an average of 25 minutes for the smallest companies to an average of 30 hours for the largest companies to complete this questionnaire, with 30 minutes being the overall average time. Respondents are not required to respond to any information collection unless it displays a valid approval number from the Office of Management and Budget (OMB). The OMB 8-digit number appears in the upper right corner of the questionnaire. If you have any comments regarding these estimates or any other aspect of this survey, send them to the Associate Director for Administration Comptroller, Paperwork Reduction Project 0607-0444, Room 3104, FB 3, Bureau of the Census, Washington, DC 20233.

Estimates are acceptable if book figures are not readily available.